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MAY 13 2008

**OFFICE OF PETITIONS**

In re Application of  
Michio KANEKO et al.  
Application No. 10/509,814  
Filed: September 30, 20004  
Attorney Docket No. A36275PCT USA  
074224.0138

**DECISION ON PETITION**

This is a decision on the petition under the unintentional provisions of 37 CFR 1.137(b), filed March 24, 2008, to revive the above-identified application.

The petition is **GRANTED**.

The application became abandoned for failure to reply in a timely manner to the non-final Office action mailed September 20, 2007, which set a shortened statutory period for reply of three (3) months. No extensions of time under the provisions of 37 CFR 1.136(a) were obtained. Accordingly, the application became abandoned on December 21, 2007.

The petition satisfies the conditions for revival pursuant to the provisions of 37 CFR 1.137(b) in that (1) the reply in the form of an amendment; (2) the petition fee of \$1,540.00; and (3) the required statement of unintentional delay have been received. Accordingly, the reply to the non-final Office action of September 20, 2007, is accepted as having been unintentionally delayed.

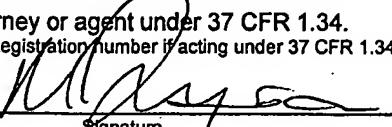
An extension of time under 37 CFR 1.136 must be filed prior to the expiration of the maximum extendable period for reply. See In re Application of S., 8 USPQ2d 1630, 1631 (Comm'r Pats. 1988). Since the \$1,640.00 extension of time fee submitted with the petition on March 24, 2008 was subsequent to the maximum extendable period for reply, this fee is unnecessary and will be credited to petitioner's deposit account.

Telephone inquiries concerning this decision should be directed to the undersigned at (571) 272-4231.

The application file is being referred to Technology Center AU 1796 for appropriate action on the concurrently filed amendment.

Michelle R. Eason  
Paralegal Specialist  
Office of Petitions

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional)
<b>FY 2006</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		074224.0138
Application Number 10/509,814		Filed 09/30/2004
For Discoloration Removal Cleaning Agent for Titanium and Titanium Alloy Building Materials, and Discoloration Removal Cleaning Method		
Art Unit 1709		Examiner Asdjodi, Mohammad Reza
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	Fee	Small Entity Fee
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460	\$230
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1050	\$525
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1640	\$820
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2230	\$1115
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-4377</u> . I have enclosed a duplicate copy of this sheet.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the	<input type="checkbox"/> applicant/inventor.	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).		
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>37,952</u>		
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
		03/24/2008 Date
Manu J. Teiwani Typed or printed name		212-408-2500 Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of _____ forms are submitted.		

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Adjustment date: 05/12/2008 CKHLOK  
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REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>5/10/08</u>		2 Serial/Patent # <u>10/509814</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input checked="" type="checkbox"/>	Extension of Time		<u>3-24-08</u>	\$ <u>1,640.00</u>
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
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		7 TOTAL AMOUNT OF REFUND	<u>1,640.00</u> <u>\$ 0.00</u>	
		8 TO BE REFUNDED BY:		
<input type="checkbox"/>	Treasury Check			
<input checked="" type="checkbox"/>	Credit Deposit A/C #:			<u>02--4377</u>
<input checked="" type="checkbox"/> No Fee Due (Explanation): <u>maximum extendable time has expired</u>				
10 REASON:				
<input type="checkbox"/>	Overpayment			
<input type="checkbox"/>	Duplicate Payment			
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Michele L. Egan</u>		TITLE: <u>Paralegal / Petitions Examiner</u>		
SIGNATURE: <u>Michele L. Egan</u>		PHONE: <u>571-272-4231</u>		
OFFICE:	Office of Petitions			
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APPROVED: <u>CKL</u>	DATE: <u>5/12/08</u>			

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